SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 138 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c

184

12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) The Travelers Companies Inc. Political Action Committee (T-PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rohlfing, James, H,, Date of Receipt Mailing Address 5 Greentree Center 525 Rte 73N Ste 407 2017 City Zip Code State Transaction ID: A2017-1129068 NJ Marlton 08053 Amount of Each Receipt this Period FEC ID number of contributing C 33.94 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Travelers Indemnity Co Associate Managing Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General 402.26 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Rohlfing, James, H, , Date of Receipt Mailing Address 5 Greentree Center 2017 525 Rte 73N Ste 407 City State Zip Code Transaction ID : A2017-1314738 NJ Marlton 08053 Amount of Each Receipt this Period FEC ID number of contributing 33.94 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Travelers Indemnity Co Associate Managing Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 436.20 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Romatis, Mark, A, Date of Receipt Mailing Address 207 Larrabee Road 09 2017 City State Zip Code Transaction ID: A2017-1129069 ME Westbrook 04092 Amount of Each Receipt this Period FEC ID number of contributing C 22.74 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Travelers Indemnity Co Mng Underwriting Dir TvEx+ Receipt For: Aggregate Year-to-Date ▼ Primary General 272.88 Other (specify) 90.62 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....